PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 09/231,415			ing Date 14/1999	To be Mailed	
	А	AS FILE	SMALL	OTHER THAN SMALL ENTITY ☐ OR SMALL ENTITY									
	FOR	N	NUMBER FILED		NUMBER EXTRA		П	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A		l	N/A		1	N/A		
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A		1	N/A			N/A		
	EXAMINATION FI (37 CFR 1 16(a), (p),		N/A		N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =		*			X \$ =		OR	x s =		
IND (37	EPENDENT CLAIN CFR 1.16(h))	1S	minus 3 =		•		1	X \$ =			X \$ =		
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and draw sheets of paper, the applica is \$250 (\$125 for small entit additional 50 sheets or fract 35 U.S.C. 41(a)(1)(G) and 3			size fee due or each thereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1,16(j))										1			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		1	TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT	04/22/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOU PAID FOR	SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· 18	Minus	99		= 0		x s =		OR	X \$52=	0	
	Independent (37 CFR 1,16(h))	+1	Minus	···6		- 0		X \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1:16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						1			OR			
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column		(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOL PAID FO	R JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,150))		Minus	**		-	1	x \$ =		OR	x s =		
	Independent (37 CFR 1.16(h))		Minus	***		-		X \$ =		OR	X \$ =		
	Application Size Fee (37 CFR 1.16(s))									1			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))						l			OR		6	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ***Life in Highest Humber Frewbushy, "aid For ILTHUS STACE to Issee than 3c, enter "20". **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to ring contents of information is equilible by a content of the properties of the prop ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.